# United States District Court

for the

Northern District of California

LA CLINICA DE LA RAZA (see attachment for additional Plaintiffs)	) ) )			
Plaintiff(s) V.	) )	Civil Action No.	3:19-cv-4980	JSC
Donald J. Trump, in his Official Capacity as President of the United States (see attachment for additional Defendants)	)			
Defendant(s)	)			

### SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address) Donald J. Trump

President of the United States 1600 Pennsylvania Avenue, NW Washington, DC 20050

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney,

whose name and address are: Nicholas Espíritu (SBN 237665)

espiritu@nilc.org

NATIONAL IMMIGRATION LAW CENTER

3450 Wilshire Boulevard, #108-62

Los Angeles, CA 90010

Telephone: 213-639-3900/Facsimile: 213-639-3911

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: \_\_\_8/19/2019



Signature of Clerk or Deputy Clerk Mark Romyn AO 440 (Rev. 06/12) Summons in a Civil Action (Page 2)

Civil Action No.

# PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

was re	This summons for (nanceived by me on (date)	ne of individual and title, if any)					
was ic	·	, ·					
	☐ I personally served	the summons on the individual	at (place) on (date)				
	☐ I left the summons at the individual's residence or usual place of abode with (name)						
	, a person of suitable age and discretion who resides the						
	on (date)		, and mailed a copy to the individual's last known address; or				
	☐ I served the summons on (name of individual) , who designated by law to accept service of process on behalf of (name of organization)						
			on (date)	; or			
	☐ I returned the summ	; or					
	☐ Other (specify):						
	My fees are \$	for travel and \$	for services, for a total of \$	0.00			
	I declare under penalty of perjury that this information is true.						
Date:							
			Printed name and title				
			Server's address				

Additional information regarding attempted service, etc:

#### **ATTACHMENT**

### **ADDITIONAL PLAINTIFFS:**

California Primary Care Association; Maternal and Child Health Access; Farmworker Justice; Council on American Islamic Relations-California; African Communities Together; Legal Aid Society of San Mateo County; Central American Resource Center; Korean Resource Center

### **ADDITIONAL ATTORNEYS:**

Linton Joaquin (SBN 73547) Alvaro M. Huerta (SBN 274787) Mayra B. Joachin (SBN 306065)

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#### **ADDITIONAL DEFENDANTS:**

UNITED STATES DEPARTMENT OF HOMELAND SECURITY; UNITED STATES CITIZENSHIP AND IMMIGRATION SERVICES; KENNETH T. CUCCINELLI, in his Official Capacity as Director of U.S. Citizenship and Immigration Services; and KEVIN K MCALEENAN, in his Official Capacity as Acting Secretary of the Department of Homeland Security